

## ISSUE SLIP STAPLE AREA (for additional cross references)

6/15/31

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.L. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
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18	✓	/	
19	✓	/	
20	✓	/	
21	N	/	
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24	N	/	
25	✓	/	
26	✓	/	
27	✓	/	
28	N	/	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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